POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*LW*	68904	9/27/00
O.I.P.E. CLASSIFIER		12	10/3
FORMALITY REVIEW		67368	11-11-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N .... Non-elected
=	.... Allowed	I .... Interference
—	(Through numeral)... Canceled	A .... Appeal
÷	.... Restricted	O .... Objected

Claim		Date								Claim		Date								Claim		Date							
Final	Original									Final	Original									Final	Original								
	1										51										101								
	2										52										102								
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	49										99										149								
	50										100										150								

If more than 150 claims or 10 actions
staple additional sheet here

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